HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400 Fort Collins, Colorado 80527-2400

PATENT APPLICATION

ATTORNEY DOCKET NO.

200401494-1

Inventor(s):

Iddys D. Figueroa et al.

Application No.: 10/801,381

Examiner: J. Michener

Confirmation No.: 3173

Filing Date:

March 15, 2004

Group Art Unit: 1762

Title: APPLICATION OF A BIOACTIVE AGENT TO A DELIVERY SUBSTRATE

Mail Stop After Final **Commissioner For Patents** PO Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

| No additional fee Other | | | | | | | Fee\$ | | | | | |
|-------------------------|--|------------------------|----------------|-------------------------|----------|-------------|-------|---------------------------|--------|----|---|--|
| | CLAIMS AS | AMENDE | D BY O | THER | THAN A | SMA | LL E | YTITY | · | | | |
| (1) FOR | (2) CLAIMS REMAINING AFTER AMENDMENT | (3) NUMBER EXTRA | HIGH PREVIO | (5) PRESENT EXTRA | | (6) RATE | | (7) ADDITIONAL FEES | | | | |
| TOTAL CLAIMS | 16 | MINUS | | 28 | = 0 | | x | \$50 | \$ | 0 | | |
| INDEP. CLAIMS | 3 | MINUS | | 3 | • | = | 0 | × | \$200 | \$ | 0 | |
| | FIRST PRESENTATION | ON OF A MU | JLTIPLE | DEPE | NDENT C | LAIM | | + | \$360 | \$ | 0 | |
| EXTENSION FEE | 1st Month \$120 | 2nd Month \$450 | | | 3rdMonth | | | 4th Month \$1590 | | \$ | 0 | |
| | | | | | | | | OTHE | R FEES | \$ | | |
| | | -T- | OTAL A | DDITIC | NAL FEE | FOR | THIS | AMEN | DMENT | \$ | 0 | |

18 Cha to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

| I hereby certify that this paper is being | |
|---|-----|
| transmitted to the Patent and Trademark Off | ice |
| facsimile number (571) 273-8300. | |
| Date of facsimile: June 12, 2006 | |

Typed Name: Signature:

Respectfully submitted, Iddys D Figueroa et al.

Watter W. Kamstein

Attorney/Agent for Applicant(s)

Reg No.:

35,565

Date:

June 12, 2006

Telephone: (503) 224-6655

Rev 10/05 (TransAmdFax)

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|--|--|------------------------|--|------|--------------------|-------------------------|------|-------------|---------------------|---------------------------|---|
| · . | CLAIMS AS | AMENDE | D BY O | THER | THAN A | SMA | LL E | YTITY | | | |
| (1) FOR | (2) CLAIMS REMAINING AFTER AMENDMENT | (3) NUMBER EXTRA | (4) HIGHEST NUMBER PREVIOUSLY PAID FOR | | | (5) PRESENT EXTRA | | (6) RATE | | (7) ADDITIONAL FEES | |
| TOTAL CLAIMS | 16 MINUS | | 28 | | | =. | 0 | x | \$50 | \$ | 0 |
| · INDEP. CLAIMS | 3 | MINUS | : | 3 | | = 0 | 0 | X \$20 | \$200 | \$ | 0 |
| | FIRST PRESENTATION | ON OF A ME | JLTIPLE | DEPĖ | NDENT C | LAIM | | + | \$360 | \$ | 0 |
| EXTENSION FEE | 1st Month \$120 | 1 | 2nd Month \$450 | | 3rdMonth \$1020 | | , 🗆 | | 4th Month \$1590 | | 0 |
| ······································ | | | | - | | | - | OTHE | R FEES | s | |

Charge \$ 0 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any over payment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

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Signature:

Respectfully submitted,

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